## (This document must be filed by noon prior to the day of the ex parte hearing)

NAME, ADDRESS & TELEPHOI	NE NUMBER	•	-	RT USE ONLY
TELEPHONE NO:	FAX	NO:		
ATTORNEY FOR (NAME): SUPERIOR COURT OF CAL	IFORNIA			
COUNTY OF YUBA				
215 5TH STREET, SUITE 20 MARYSVILLE, CA 95901-5				
(530) 740-1800				
PLAINTIFF/PETITIONER:				
VS.				
DEFENDANT/RESPONDEN	T:			
		TE ADDI IOATION E	OR CASE NUMBER:	
PROOF OF SERVICE O	HARASSMENT [] ELDI		OR CASE NUMBER:	
	DRARY RESTRAINING			
l,		residing at	mailing address	:
1. Gave notice to	norson notified	ondate	attime	by
(select manner of no	•	uale	ume	
<u>`</u>	,			
Telephone nu	mber			
☐ Voicemail				
In Person				
☐ In writing				
By facsimile				
☐ By text messa	age			
☐ By e-mail				
Social media				
2. I stated that	is	seeking temporary e	ex parte orders for	
party'	s name	0 1 7	•	sment/elder ex parte order
3. I also gave the date, tir	me and place of the ex	k parte hearing.		
4. I asked whether the op	posing party would ap	ppear or file respons	sive pleadings and was a	dvised that
				·
<b>5.</b> I thereafter served the	papers at the first reas	sonable opportunity	before the hearing.	
6. Exceptional circums	stances justify that sho	orter notice given as	s follows	
C. Exceptional officiality	starrood jadary androni	orter neares given as		
I declare under penalty of	neriury under the low	s of the State of Co	lifornia that the foregoing	is true and correct
i deciale under penalty of	perjury under the laws	s of the State of Ca	morna macme roregong	is true and correct.
Date:				
=		<del></del>	<del></del>	
Printed Name		Signature	e of Declarant	